

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

ADDRESS (number and street)

2155 HIGHWAY 42 SOUTH

☐Check if different  
than previously  
reported. (ACC)

MCDONOUGH

GA

30252

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00265546

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 0

0 1

2 0 0 9

through

1 2

3 1

2 0 0 9

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

DIANA RENEE DIXON

Signature of Treasurer

Electronically Filed by DIANA RENEE DIXON

Date

0 4

1 5

2 0 1 0

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Report Covering the Period:

From:

M M  
1 0D D  
0 1Y Y Y Y  
2 0 0 9

To:

M M  
1 2D D  
3 1Y Y Y Y  
2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2009</span>		30116.71
(b) Cash on Hand at Beginning of Reporting Period .....	83326.71	
(c) Total Receipts (from Line 19) .....	26447.70	112678.82
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	109774.41	142795.53
7. Total Disbursements (from Line 31) .....	28778.57	61799.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	80995.84	80995.84
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
1	0	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
1	2	3	1	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	26447.70	112578.82
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	26447.70	112678.82
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	26447.70	112678.82
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	26447.70	112678.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	26447.70	112678.82

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	4979.55	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	28778.57	56820.14	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28778.57	61799.69	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28778.57	61799.69	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	26447.70	112678.82
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26447.70	112678.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

ALLEN MITCHELL

Mailing Address 1636 KING CIRCLE

City

ROCKY MOUNT

State

NC

Zip Code

27801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: SA11AI.12790

Amount of Each Receipt this Period

250.00

CK WAS NEVER CASHED FROM  
09/20/07**B.**

Full Name (Last, First, Middle Initial)

SOUTHERN STATES P.B.A

Mailing Address 2155 HWY 42 S

City

MCDONOUGH

State

GA

Zip Code

30252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

8622.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	0	9

Transaction ID: SA11AI.12773

Amount of Each Receipt this Period

8622.35

\*\$.50 PER MEMBER PER MONTH

**C.**

Full Name (Last, First, Middle Initial)

SOUTHERN STATES P.B.A

Mailing Address 2155 HWY 42 S

City

MCDONOUGH

State

GA

Zip Code

30252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

17157.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	9

Transaction ID: SA11AI.12774

Amount of Each Receipt this Period

8535.50

\*\$.50 PER MEMBER PER MONTH

SUBTOTAL of Receipts This Page (optional) .....

17407.85

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

SOUTHERN STATES P.B.A

Mailing Address 2155 HWY 42 S

City

MCDONOUGH

State

GA

Zip Code

30252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

26197.70

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.12775

Amount of Each Receipt this Period

9039.85

\*\$.50 PER MEMBER PER MONTH

**SUBTOTAL** of Receipts This Page (optional) .....

9039.85

**TOTAL** This Period (last page this line number only) .....

26447.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

JAMES ADAMS, Jr.

Mailing Address 111 PINE CREEK DR

City  
HAMPTONState  
VAZip Code  
23669Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12673

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	0	9

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

YOLANDA ADREAN

Mailing Address 744 CONWAY GLEN DR

City  
ATLANTAState  
GAZip Code  
30327Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12741

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	9

Amount of Each Disbursement this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City  
ATLANTAState  
GAZip Code  
30303Purpose of Disbursement  
AD FOR NON-FED CANDIDATECandidate Name  
MARY NORWOOD

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12717

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	9

Amount of Each Disbursement this Period

92.70

SUBTOTAL of Disbursements This Page (optional) .....

742.70

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.** Full Name (Last, First, Middle Initial)  
ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
CARLA SMITH

004  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12719

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

**B.** Full Name (Last, First, Middle Initial)  
ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
STEVE BRODIE

004  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12720

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

**C.** Full Name (Last, First, Middle Initial)  
ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
JUANITA SMITH

004  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12722

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

**SUBTOTAL** of Disbursements This Page (optional) .....

278.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
ADAM BRACKMAN

004

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12725

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

B.

Full Name (Last, First, Middle Initial)

ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
CAESAR MITCHELL

004

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District:

Transaction ID: SB29.12727

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

C.

Full Name (Last, First, Middle Initial)

ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
IVORY YOUNG

004

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District:

Transaction ID: SB29.12728

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

SUBTOTAL of Disbursements This Page (optional) .....

278.10

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.** Full Name (Last, First, Middle Initial)  
ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
YOLANDA ADREAN

004  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12729

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

**B.** Full Name (Last, First, Middle Initial)  
ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
KEISHA WAITES

004  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: GA District:

Transaction ID: SB29.12732

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

**C.** Full Name (Last, First, Middle Initial)  
ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR NON-FED CANDIDATE

Candidate Name  
AMIR FAROKHI

004  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12733

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

92.70

**SUBTOTAL** of Disbursements This Page (optional) .....

278.10

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
MARY NORWOOD004  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12768

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	0	9

Amount of Each Disbursement this Period

637.50

**B.**

Full Name (Last, First, Middle Initial)

ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
CAESAR MITCHELL004  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: GA District:

Transaction ID: SB29.12769

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	0	9

Amount of Each Disbursement this Period

637.50

**C.**

Full Name (Last, First, Middle Initial)

ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
AMIR FAROKHI004  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12770

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	8	/	2	0	0	9

Amount of Each Disbursement this Period

637.50

SUBTOTAL of Disbursements This Page (optional) .....

1912.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

ATLANTA JOURNAL-CONSTITUTION

Mailing Address 72 MARIETTA STREET NW

City  
ATLANTA

State  
GA

Zip Code  
30303

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATE

Candidate Name  
LIZ COYLE

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12771

Date of Disbursement

11 / 18 / 2009

Amount of Each Disbursement this Period

637.50

B.

Full Name (Last, First, Middle Initial)

MAMYE BACOTE

Mailing Address 1216 EMMA DRIVE

City  
NEWPORT NEWS

State  
VA

Zip Code  
23605

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District:

Transaction ID: SB29.12667

Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

JOHN BELL, Jr.

Mailing Address PO BOX 56075

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23456

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12704

Date of Disbursement

10 / 08 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1637.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) BENTON COURIER	<b>Transaction ID:</b> SB29.12746
	Mailing Address 321 N MARKET	Date of Disbursement
	City BENTON State AR Zip Code 72015	<div> <div>10</div> <div>19</div> <div>2009</div> </div>
	Purpose of Disbursement 1/2 CENT SALES TAX INCREASE	Amount of Each Disbursement this Period
	Candidate Name	406.35
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<div>004</div> <div>Category/ Type</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) JOE BOUCHARD	<b>Transaction ID:</b> SB29.12707
	Mailing Address 1240 SMITH COVE CIR	Date of Disbursement
	City VIRGINIA BEACH State VA Zip Code 23455	<div> <div>10</div> <div>08</div> <div>2009</div> </div>
	Purpose of Disbursement CONTRIBUTION	Amount of Each Disbursement this Period
	Candidate Name	500.00
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<div>011</div> <div>Category/ Type</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) ADAM BRACKMAN	<b>Transaction ID:</b> SB29.12738
	Mailing Address 1368 PARK TRACE SE	Date of Disbursement
	City ATLANTA State GA Zip Code 30315	<div> <div>10</div> <div>19</div> <div>2009</div> </div>
	Purpose of Disbursement CONTRIBUTION	Amount of Each Disbursement this Period
	Candidate Name	250.00
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<div>011</div> <div>Category/ Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

1156.35

**TOTAL** This Period (last page this line number only) .....

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input checked="" type="checkbox"/>	29	<input type="checkbox"/>	30b

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

150.00

500.00

150.00

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

AMIR FAROKHI

Transaction ID: SB29.12737

Date of Disbursement

10 / 19 / 2009

Mailing Address 320 MARTIN LUTHER KING DR SE  
#16

City ATLANTA State GA Zip Code 30312

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

AMIR FAROKHI

Transaction ID: SB29.12767

Date of Disbursement

11 / 12 / 2009

Mailing Address 320 MARTIN LUTHER KING DR SE  
#16

City ATLANTA State GA Zip Code 30312

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Transaction ID: SB29.12761

Date of Disbursement

10 / 30 / 2009

Mailing Address P.O. BOX 1140

City MEMPHIS State TN Zip Code 38101

Purpose of Disbursement  
POSTAGE

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General  
Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

213.03

SUBTOTAL of Disbursements This Page (optional) .....

713.03

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	<b>Transaction ID:</b> SB29.12786 <b>Date of Disbursement</b>
Mailing Address P.O. BOX 1140	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 9</div> </div>
City MEMPHIS State TN Zip Code 38101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POSTAGE	<div>95.58</div>
Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) FEDERAL EXPRESS	<b>Transaction ID:</b> SB29.12802 <b>Date of Disbursement</b>
Mailing Address P.O. BOX 1140	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 3 / 2 0 0 9</div> </div>
City MEMPHIS State TN Zip Code 38101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POSTAGE	<div>11.02</div>
Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) FIRST NATIONAL BANK	<b>Transaction ID:</b> SB29.12801 <b>Date of Disbursement</b>
Mailing Address 2750 HWY 42 NORTH	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 9</div> </div>
City MCDONOUGH State GA Zip Code 30253	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement SERVICE CHARGE	<div>28.00</div>
Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

134.60

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

PHILLIP HAMILTON

Mailing Address 342 JAMES BALDWIN ST

City NEWPORT NEWS State VA Zip Code 23606

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12666

Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

GORDON HELSEL, Jr.

Mailing Address 710 POQUOSON AVE

City POQUOSON State VA Zip Code 23662

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12672

Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

INNER BANKS MEDIA

Mailing Address 408 WEST ARLINGTON BLVD  
STE 101-C

City GREENVILLE State NC Zip Code 27834

Purpose of Disbursement  
RADIO AD FOR A NON FEDERAL CANDIDATECandidate Name  
HOWARD STEARN004  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12747

Date of Disbursement

10 / 21 / 2009

Amount of Each Disbursement this Period

490.00

SUBTOTAL of Disbursements This Page (optional) ▶

1490.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

JENNIFER LEE

Mailing Address 34 RIVERVIEW AVE

City  
PORTSMOUTH

State  
VA

Zip Code  
23704

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12703

Date of Disbursement

10 / 08 / 2009

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

R W BOBBY MATHIESON

Mailing Address PO BOX 1604

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23451

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12705

Date of Disbursement

10 / 08 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

PAULA J MILLER

Mailing Address 9437 WELLS PARKWAY

City  
NORFOLK

State  
VA

Zip Code  
23503-3538

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12708

Date of Disbursement

10 / 08 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

CAESAR MITCHELL

Mailing Address P.O. BOX 3437

City  
ATLANTA

State  
GA

Zip Code  
30302

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: GA District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.12744

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

CAESAR MITCHELL

Mailing Address P.O. BOX 3437

City  
ATLANTA

State  
GA

Zip Code  
30302

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: GA District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.12766

Date of Disbursement

11 / 12 / 2009

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MARY NORWOOD

Mailing Address 3371 HABERSHAM RD

City  
ATLANTA

State  
GA

Zip Code  
30305

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.12745

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

MARY NORWOOD

Mailing Address 3371 HABERSHAM RD

City  
ATLANTA

State  
GA

Zip Code  
30305

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12764

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

DAVE NUTTER

Mailing Address P.O. BOX 1344

City  
CHRISTIANSBURG

State  
VA

Zip Code  
24068

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

GLEN ODER

Mailing Address 213 ROBIN DR

City  
NEWPORT NEWS

State  
VA

Zip Code  
23606

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District:

Transaction ID: SB29.12671

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

DAVID POISSON

Mailing Address 20756 EASTLAKE COURT

City  
STERLING

State  
VA

Zip Code  
20185

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: VA District: 32

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.12675

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

CAROL PRATT

Mailing Address PO BOX 947

City  
DUBLIN

State  
VA

Zip Code  
24084

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.12758

Date of Disbursement

10 / 27 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

PETER W SCHMIDT

Mailing Address 1029 BOBOLINK DR

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23451

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.12706

Date of Disbursement

10 / 08 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) CARLA SMITH	<b>Transaction ID:</b> SB29.12735 <b>Date of Disbursement</b>																				
Mailing Address 1099 WOODLAND AVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	0	9												
City ATLANTA State GA Zip Code 30316	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>150.00</td> </tr> </table>	150.00																			
150.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) JUANITA SMITH	<b>Transaction ID:</b> SB29.12740 <b>Date of Disbursement</b>																				
Mailing Address 2849 FAIRBURN RD SW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	0	9												
City ATLANTA State GA Zip Code 30331	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>150.00</td> </tr> </table>	150.00																			
150.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) THE CARY NEWS	<b>Transaction ID:</b> SB29.12750 <b>Date of Disbursement</b>																				
Mailing Address 212 EAST CHATHAM ST	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	0	9												
City CARY State NC Zip Code 27511	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement AD FOR A NON-FED CANDIDATE	<table border="1"> <tr> <td>112.41</td> </tr> </table>	112.41																			
112.41																					
Candidate Name JACKIE HOLCOMBE	<table border="1"> <tr> <td>004</td> </tr> </table> Category/ Type	004																			
004																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**412.41**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) THE CARY NEWS	<b>Transaction ID:</b> SB29.12752 <b>Date of Disbursement</b>
Mailing Address 212 EAST CHATHAM ST	<div> <div>10</div> <div>22</div> <div>2009</div> </div>
City CARY State NC Zip Code 27511	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement AD FOR A NON-FED CANDIDATE	<div>112.40</div>
Candidate Name STEVE DIEHL	<div>004</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) THE CARY NEWS	<b>Transaction ID:</b> SB29.12754 <b>Date of Disbursement</b>
Mailing Address 212 EAST CHATHAM ST	<div> <div>10</div> <div>22</div> <div>2009</div> </div>
City CARY State NC Zip Code 27511	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement AD FOR A NON-FED CANDIDATE	<div>112.40</div>
Candidate Name TOM MURRY	<div>004</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) THE CHARLOTTE OBSERVER	<b>Transaction ID:</b> SB29.12633 <b>Date of Disbursement</b>
Mailing Address	<div> <div>10</div> <div>02</div> <div>2009</div> </div>
City State Zip Code	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement ADVERTISEMENT FOR A NON-FED CANDIDATE	<div>327.00</div>
Candidate Name BRIAN SISSON	<div>004</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

551.80

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.** Full Name (Last, First, Middle Initial)  
THE CHARLOTTE OBSERVER

Mailing Address

City State Zip Code

Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATE

Candidate Name  
CHARLES JETER

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12634

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

327.00

**B.** Full Name (Last, First, Middle Initial)  
THE CHARLOTTE OBSERVER

Mailing Address

City State Zip Code

Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATE

Candidate Name  
KEN LUCAS

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12636

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

327.00

**C.** Full Name (Last, First, Middle Initial)  
THE CHARLOTTE OBSERVER

Mailing Address

City State Zip Code

Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATE

Candidate Name  
EDDIE BRUCE

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12637

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

327.00

**SUBTOTAL** of Disbursements This Page (optional) .....

981.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

THE CHARLOTTE OBSERVER

Mailing Address

City

State

Zip Code

Purpose of Disbursement

ADVERTISEMENT FOR A NON-FED CANDIDATE

Candidate Name

WILLIAM IULIANO

004

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2009

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.12639

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

327.00

B.

Full Name (Last, First, Middle Initial)

THE CHARLOTTE OBSERVER

Mailing Address

City

State

Zip Code

Purpose of Disbursement

ADVERTISEMENT FOR A NON-FED CANDIDATE

Candidate Name

DAVID GILROY

004

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2009

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.12641

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

327.00

C.

Full Name (Last, First, Middle Initial)

THE CHARLOTTE OBSERVER

Mailing Address

City

State

Zip Code

Purpose of Disbursement

ADVERTISEMENT FOR A NON-FED CANDIDATE

Candidate Name

JOE VAGNONE

004

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2009

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.12644

Date of Disbursement

10 / 02 / 2009

Amount of Each Disbursement this Period

327.00

SUBTOTAL of Disbursements This Page (optional) .....

981.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) THE CHARLOTTE OBSERVER	<b>Transaction ID:</b> SB29.12646 <b>Date of Disbursement</b>
Mailing Address	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 2 / 2 0 0 9</div> </div>
City State Zip Code	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement ADVERTISEMENT FOR A NON-FED CANDIDATE Candidate Name THURMAN ROSS	<div> <div>327.00</div> <div>004 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) THE CHARLOTTE OBSERVER	<b>Transaction ID:</b> SB29.12648 <b>Date of Disbursement</b>
Mailing Address	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 2 / 2 0 0 9</div> </div>
City State Zip Code	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement ADVERTISEMENT FOR A NON-FED CANDIDATE Candidate Name RICK BARTON	<div> <div>327.00</div> <div>004 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) THE CHARLOTTE OBSERVER	<b>Transaction ID:</b> SB29.12652 <b>Date of Disbursement</b>
Mailing Address	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 2 / 2 0 0 9</div> </div>
City State Zip Code	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement ADVERTISEMENT FOR A NON-FED CANDIDATE Candidate Name DREW CRAWFORD	<div> <div>327.00</div> <div>004 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**981.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

THE DAILY REFLECTOR

Mailing Address 1150 SUGG PKWY

City  
GREENVILLE

State  
NC

Zip Code  
27835

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATE

Candidate Name  
MINNIE ANDERSON

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12710

Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

258.62

B.

Full Name (Last, First, Middle Initial)

THE DAILY REFLECTOR

Mailing Address 1150 SUGG PKWY

City  
GREENVILLE

State  
NC

Zip Code  
27835

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
HOWARD STEARN

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12713

Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

258.63

C.

Full Name (Last, First, Middle Initial)

THE DAILY REFLECTOR

Mailing Address 1150 SUGG PKWY

City  
GREENVILLE

State  
NC

Zip Code  
27835

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
MILDRED COTHAM

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12715

Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

258.63

SUBTOTAL of Disbursements This Page (optional) .....

775.88

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A.

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATE

Candidate Name  
BRIAN SISSON

004

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12691

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

165.00

B.

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATE

Candidate Name  
CHARLES JETER

004

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12694

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

165.00

C.

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATE

Candidate Name  
KEN LUCAS

004

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12695

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

165.00

SUBTOTAL of Disbursements This Page (optional) .....

495.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
EDDIE BRUCE

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12696

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	9

Amount of Each Disbursement this Period

165.00

**B.**

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
WILLIAM IULIANO

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12697

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	9

Amount of Each Disbursement this Period

165.00

**C.**

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
DAVID GILROY

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12698

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	9

Amount of Each Disbursement this Period

165.00

SUBTOTAL of Disbursements This Page (optional) .....

495.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
JOE VAGNONE004  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12699

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

165.00

**B.**

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
THURMAN ROSS004  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12700

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

165.00

**C.**

Full Name (Last, First, Middle Initial)

THE HERALD WEEKLY

Mailing Address 1421 C ORCHID LAKE DR

City CHARLOTTE State NC Zip Code 28270

Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
RICK BARTON004  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12701

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

165.00

SUBTOTAL of Disbursements This Page (optional) ►

495.00

TOTAL This Period (last page this line number only) ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) THE HERALD WEEKLY	<b>Transaction ID:</b> SB29.12702 <b>Date of Disbursement</b>																				
Mailing Address 1421 C ORCHID LAKE DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	0	9												
City CHARLOTTE State NC Zip Code 28270	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement AD FOR A NON-FED CANDIDATE	<table border="1"> <tr> <td>165.00</td> </tr> </table>	165.00																			
165.00																					
Candidate Name DREW CRAWFORD	<table border="1"> <tr> <td>004</td> </tr> </table> Category/ Type	004																			
004																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) THE LAKE NORMAN CITIZEN	<b>Transaction ID:</b> SB29.12654 <b>Date of Disbursement</b>																				
Mailing Address 307 GILEAD RD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	2		2	0	0	9												
City HUNTERSVILLE State NC Zip Code 28070	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement ADVERTISEMENT FOR A NON-FED CANDIDATE	<table border="1"> <tr> <td>125.40</td> </tr> </table>	125.40																			
125.40																					
Candidate Name BRIAN SISSON	<table border="1"> <tr> <td>004</td> </tr> </table> Category/ Type	004																			
004																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) THE LAKE NORMAN CITIZEN	<b>Transaction ID:</b> SB29.12656 <b>Date of Disbursement</b>																				
Mailing Address 307 GILEAD RD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	2		2	0	0	9												
City HUNTERSVILLE State NC Zip Code 28070	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement ADVERTISEMENT FOR A NON-FED CANDIDATE	<table border="1"> <tr> <td>125.40</td> </tr> </table>	125.40																			
125.40																					
Candidate Name CHARLES JETER	<table border="1"> <tr> <td>004</td> </tr> </table> Category/ Type	004																			
004																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**415.80**

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.** Full Name (Last, First, Middle Initial)  
THE LAKE NORMAN CITIZEN

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATECandidate Name  
KEN LUCAS004  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12657

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

125.40

**B.** Full Name (Last, First, Middle Initial)  
THE LAKE NORMAN CITIZEN

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATECandidate Name  
EDDIE BRUCE004  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12658

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

125.40

**C.** Full Name (Last, First, Middle Initial)  
THE LAKE NORMAN CITIZEN

Mailing Address 307 GILEAD RD

City HUNTERSVILLE State NC Zip Code 28070

Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATECandidate Name  
WILLIAM IULIANO004  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12659

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

125.40

SUBTOTAL of Disbursements This Page (optional) .....

376.20

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

THE LAKE NORMAN CITIZEN

Mailing Address 307 GILEAD RD

City  
HUNTERSVILLEState  
NCZip Code  
28070Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATECandidate Name  
DAVID GILROY004  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12660

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Amount of Each Disbursement this Period

125.40

**B.**

Full Name (Last, First, Middle Initial)

THE LAKE NORMAN CITIZEN

Mailing Address 307 GILEAD RD

City  
HUNTERSVILLEState  
NCZip Code  
28070Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATECandidate Name  
JOE VAGNONE004  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12662

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Amount of Each Disbursement this Period

125.40

**C.**

Full Name (Last, First, Middle Initial)

THE LAKE NORMAN CITIZEN

Mailing Address 307 GILEAD RD

City  
HUNTERSVILLEState  
NCZip Code  
28070Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATECandidate Name  
THURMAN ROSS004  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12663

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

Amount of Each Disbursement this Period

125.40

SUBTOTAL of Disbursements This Page (optional) .....

376.20

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

THE LAKE NORMAN CITIZEN

Mailing Address 307 GILEAD RD

City  
HUNTERSVILLEState  
NCZip Code  
28070Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATECandidate Name  
RICK BARTON

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12664

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

125.40

**B.**

Full Name (Last, First, Middle Initial)

THE LAKE NORMAN CITIZEN

Mailing Address 307 GILEAD RD

City  
HUNTERSVILLEState  
NCZip Code  
28070Purpose of Disbursement  
ADVERTISEMENT FOR A NON-FED CANDIDATECandidate Name  
DREW CRAWFORD

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12665

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

125.40

**C.**

Full Name (Last, First, Middle Initial)

THE VIRGINIAN PILOT

Mailing Address 160 W BRAMBLETON AVE

City  
NORFOLKState  
VAZip Code  
23510Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
JOHN BELL, Jr.

011

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12676

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	9

Amount of Each Disbursement this Period

481.50

SUBTOTAL of Disbursements This Page (optional) .....

732.30

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

THE VIRGINIAN PILOT

Mailing Address 160 W BRAMBLETON AVE

City  
NORFOLKState  
VAZip Code  
23510Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
JOE BOUCHARD

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12678

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

481.50

**B.**

Full Name (Last, First, Middle Initial)

THE VIRGINIAN PILOT

Mailing Address 160 W BRAMBLETON AVE

City  
NORFOLKState  
VAZip Code  
23510Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
R W BOBBY MATHIESON

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12681

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

481.50

**C.**

Full Name (Last, First, Middle Initial)

THE VIRGINIAN PILOT

Mailing Address 160 W BRAMBLETON AVE

City  
NORFOLKState  
VAZip Code  
23510Purpose of Disbursement  
AD FOR A NON-FED CANDIDATECandidate Name  
PAULA J MILLER

004

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12683

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

481.50

SUBTOTAL of Disbursements This Page (optional) .....

1444.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

<b>A.</b> Full Name (Last, First, Middle Initial) THE VIRGINIAN PILOT	<b>Transaction ID:</b> SB29.12685 <b>Date of Disbursement</b>
Mailing Address 160 W BRAMBLETON AVE	<div> <div>10</div> <div>06</div> <div>2009</div> </div>
City NORFOLK State VA Zip Code 23510	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement AD FOR A NON-FED CANDIDATE	<div>481.50</div>
Candidate Name PETER W SCHMIDT	<div>004</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) THE VIRGINIAN PILOT	<b>Transaction ID:</b> SB29.12687 <b>Date of Disbursement</b>
Mailing Address 160 W BRAMBLETON AVE	<div> <div>10</div> <div>06</div> <div>2009</div> </div>
City NORFOLK State VA Zip Code 23510	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement AD FOR A NON-FED CANDIDATE	<div>481.50</div>
Candidate Name JASON E CALL	<div>004</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) THE VIRGINIAN PILOT	<b>Transaction ID:</b> SB29.12689 <b>Date of Disbursement</b>
Mailing Address 160 W BRAMBLETON AVE	<div> <div>10</div> <div>06</div> <div>2009</div> </div>
City NORFOLK State VA Zip Code 23510	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement AD FOR A NON-FED CANDIDATE	<div>481.50</div>
Candidate Name JENNIFER LEE	<div>004</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1444.50

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

GRAY TOLLISON

Mailing Address P.O. BOX 1358

City  
OXFORDState  
MSZip Code  
38655Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12749

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

KEISHA WAITES

Mailing Address 742 CASPLAN ST

City  
ATLANTAState  
GAZip Code  
30310Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District:

Transaction ID: SB29.12739

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	9

Amount of Each Disbursement this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

JEION WARD

Mailing Address 1300 CALDWELL DR

City  
HAMPTONState  
VAZip Code  
23666Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.12669

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1150.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

**A.**

Full Name (Last, First, Middle Initial)

WPTF

Mailing Address 3012 HIGHWOODS BLVD  
STE 200

City RALEIGH State NC Zip Code 27604

Purpose of Disbursement  
RADIO AD FOR A NON-FED CANDIDATE

Candidate Name  
JENNIFER ROBINSON

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB29.12756

Date of Disbursement

10 / 23 / 2009

Amount of Each Disbursement this Period

1600.00

**B.**

Full Name (Last, First, Middle Initial)

IVORY YOUNG

Mailing Address 90 GRIFFIN ST

City ATLANTA State GA Zip Code 30314

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: GA District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB29.12743

Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

28778.57